

011504  
05900 U.S.PTO

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Our Docket No.: <b>I69.12-0614</b>	Date: <b>January 15, 2004</b>
First Named Inventor: <b>Kurt J. Korkowski</b>	
Title: <b>ENDCAP FOR REDUCING AIRFLOW EXCITATION OF HEAD GIMBAL ASSEMBLY</b>	
Express Mail No.: <b>EV 302262210 US</b>	

22390 U.S.PTO  
10758330  
011504**APPLICATION ELEMENTS**

**Commissioner for Patents**  
**ADDRESS TO:** P.O. Box 1450  
 Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Calculation Sheet (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )
2. <input type="checkbox"/> Applicant claims small entity status	8. Nucleotide and/or Amino Acid Sequence Submission <i>(If applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification Total Pages [25] - Descriptive title of the invention - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claims - Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Copy (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identify of above copies
4. <input checked="" type="checkbox"/> Drawings (35 U.S.C. 113) Total Sheets [8]	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages [3] a. <input checked="" type="checkbox"/> Newly Executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d) - for continuation/divisional with Box 18 completed) [Mark Box 5 below] I. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b)	10. <input checked="" type="checkbox"/> 37 C.F.R. 3.73(b) Submission <input checked="" type="checkbox"/> Power of Attorney
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76.	11. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> ) 12. <input checked="" type="checkbox"/> Information Disclosure Statement 13. <input type="checkbox"/> Preliminary Amendment Total Pages [ ] 14. <input checked="" type="checkbox"/> Return Receipt Postcard ( <i>Should be specifically itemized</i> ) 15. <input type="checkbox"/> Certified Copy of Priority document(s) ( <i>If foreign priority is claimed</i> ) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Application must attach form PTO/SB/35 or its equivalent 17. <input checked="" type="checkbox"/> Other <u>Associate Power of Attorney or Agent (37 C.F.R. 1.34)</u>

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation     Division     Continuation-in-part (CIP) of prior Application No.

Prior Application Information: Examiner \_\_\_\_\_ Group Art Unit \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

ATTY NAME AND REG. NO.	David R. Fairbairn, Reg. No. 26,047	SIGNATURE: 	ADDRESS
TELEPHONE	(612) 339-1863	FAX: (612) 339-6580	

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# FEE TRANSMITTAL

Total Amount of Payment \$810.00

*Compl te if Known*

Application No.	
Filing Date	Herewith
First Named Inventor	Kurt J. Korkowski et al.
Group Art Unit	
Examiner Name	

Atty. Docket Number	I69.12-0614
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## METHOD OF PAYMENT (Check One)

1.  The Commissioner is hereby authorized to charge any additional fee required under 37 C.F.R. 1.16 and 1.17 and credit any over payments to Deposit Account No.11-0982. Deposit Account Name: Kinney & Lange, P.A. A duplicate copy of this communication is enclosed

2.  Check Enclosed

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
1001	770	2001	385	[X] Utility Filing Fee
1002	340	2002	170	<input type="checkbox"/> Design Filing Fee
1004	770	2004	385	<input type="checkbox"/> Reissue Filing Fee
1005	160	2005	80	<input type="checkbox"/> Prov. Filing Fee

Subtotal (1) \$770.00

### 2. EXTRA CLAIM FEES

Number Claims	Prior**	Extra	Fee from Below	Fee Paid
Total	<u>20</u>	<u>20</u>	= <u>0</u> x <u>0</u> =	<u>0</u>
Indep.	<u>3</u>	<u>0</u>	= <u>0</u> x <u>0</u> =	<u>0</u>

Multiple Dependent Claims      \* = \*

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple Dependent Claim
1204	86	2204	43	Reissue Independent Claims Over Original Patent
1205	18	2205	9	Reissue claims in excess of 20 and over original patent

Subtotal (2) \$

## FEE CALCULATION (Continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee paid
1051	130	2051	65	Surcharge - Late filing fee or oath	*
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	*
1053	130	1053	130	Non-English specification	*
1812	2,520	1812	2,520	For Filing a Request for Reexamination	*
1251	110	2251	55	Extension for reply within first month	*
1252	420	2252	210	Extension for reply within second month	*
1253	950	2253	475	Extension for reply within third month	*
1254	1,480	2254	740	Extension for reply within fourth month	*
1255	2,010	2255	1,005	Extension for reply within fifth month	*
1402	330	2402	165	Filing a brief in support of an appeal	*
1403	290	2403	145	Request for oral hearing	*
1814	110	2814	55	Terminal Disclaimer Fee	*
1452	110	2452	55	Petition to revive - unavoidable	*
1453	1,330	2453	665	Petition to revive - unintentional	*
1501	1,330	2501	665	Utility/Reissue issue fee	*
1502	480	2502	240	Design issue fee	*
1460	130	1460	130	Petitions to the Commissioner	*
1807	50	1807	50	Petitions related to provisional applications	*
1806	180	1806	180	Submission of Information Disclosure Statement	*
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40
1801	770	2801	385	Request for Continued Examination (RCE)	*
Other fee (specify) _____					*

Subtotal (3) \$40.00

Signature   
David R. Fairbairn  
Date 1/15/04

Reg. No. 26,047

Deposit Account No. 11-0982